

POSITION	ID NO.	DATE
CLASSIFIER	11	8/30/97
EXAMINER	211	8-20-97
TYPIST	407	8-25-97
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

BEST AVAILABLE

Claim	Date
1	8/30/97
2	8/30/97
3	8/30/97
4	8/30/97
5	8/30/97
6	8/30/97
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50	8/30/97

SYMBOLS  
 (Through numerical) Restricted  
 (Through numerical) Allowed  
 (Through numerical) Canceled  
 (Through numerical) Restricted  
 (Through numerical) Non-extended  
 (Through numerical) Interference  
 (Through numerical) Appeal  
 (Through numerical) Objected

Claim	Date
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